

# UT Southwestern

## Simmons Cancer Center

### Improving Telehealth Delivery Post-Pandemic

When the COVID-19 outbreak became a global health emergency in early 2020, U.S. cancer centers responded by offering “telehealth” video visits – connecting patients and providers via smartphone, tablet, or computer – as an alternative to in-person appointments. This virtual visit adaptation was especially important for cancer patients, who are at higher risk of contracting and dying from COVID due to their compromised immune systems. However, there was little time to optimize telehealth delivery before launching services.

With funding from a community-engaged research grant awarded by Simmons Comprehensive Cancer Center in 2020, UT Southwestern population scientists [Robin T. Higashi](#), Ph.D., and [Timothy P. Hogan](#), Ph.D., explored patient and provider responses to the roll-out of pandemic telehealth services and looked for opportunities to strengthen delivery, particularly for vulnerable patients.



*Timothy P. Hogan, Ph.D. (left) and Robin T. Higashi, Ph.D. (right)*

“The pandemic transformed the norms of cancer care delivery with telehealth offering great benefits to both patients and providers,” notes Dr. Higashi. “But it’s important to ensure that these benefits do not exacerbate inequalities based on limitations in people’s ability to use technology.”

To study telehealth from a care delivery perspective, Drs. Higashi and Hogan completed 106 surveys and 20 interviews with cancer providers and staff at Simmons Cancer Center between December 2020 and November 2021. Their questions probed the successes and obstacles involved in telehealth delivery to patients with various types of cancer.

To examine older patients' experiences with telehealth, Higashi and Hogan conducted 128 surveys and interviewed 15 individuals ages 60 and older. These individuals included both Simmons patients and members of The Senior Source, a local community organization serving Dallas-area seniors.

The UTSW researchers uncovered several ways to enhance telehealth delivery for the future, particularly for older patients and others with limited experience using digital devices.

First, while most providers and staff thought telehealth technology fit well within their daily clinic workflow, they offered the following suggestions:

- Offering more training and ongoing technical support
- Keeping clinical exam rooms flexible for in-person and telehealth visits
- Making telehealth more available for supportive care services, like nutrition counseling

And although most older patients felt positive about telehealth, nearly a third reported challenges joining video visits and understanding the telehealth process. Their suggestions for assisting patients with limited digital experience included:

- Offering video tutorials and telehealth practice sessions
- Hiring patient navigators to assist with technical difficulties

Despite challenges with the technology, most patients and providers said that they want to continue using telehealth services, even after the COVID-19 pandemic passes. Both patients and providers described how telehealth appointments can be helpful for discussing treatment side-effects, test results, and treatment follow-up.

"It's more efficient," said a Simmons patient. "I feel like it's a better use of my time. It eliminates the drive; it eliminates the parking. It eliminates the check-in. I feel like it eliminates some waiting or dead time, because if I'm at home, I got some other things I could do, I could be working on while I'm waiting. Number two, I don't feel any different in terms of accomplishing what I wanted to get out of those meetings. I don't feel I've lost anything when I've done ones by video."

One Simmons oncologist commented, “There’s a positive that comes from seeing someone in their home and with their family. I had a patient...and even when she was very ill, where there’s no way she would’ve come into clinic to see me...to appropriately talk about what are we going to do, that wouldn’t have been allowed in person.”

“In many ways,” says Dr. Hogan, “the onset of the COVID-19 pandemic pushed health care organizations over the initial hurdles of adopting telehealth technology. What now lies ahead of us is the work of determining how video visits can best be integrated into cancer care not only to optimize outcomes, but to reflect patient preferences and enhance, not complicate, the work of providers.”

Over the next year, Dr. Higashi will, again, partner with The Senior Source to build on the telehealth research established with Dr. Hogan. Using an award from the Cary Council, which provides funding to promising early-stage investigators doing innovative scientific research, Dr. Higashi will study how Black/African American and Hispanic populations in UT Southwestern’s new Redbird Clinic area may be affected by the increased use of telehealth. And, working with local community organizations, she will identify strategies to improve telehealth experiences for these communities.

